

894

FACILITY NAME: IAD047055140  
LOCATION: WCI LAUNDRY DIVISION - FRIGIDAIRE CO.  
RCRA ID #: 601 E CENTRAL AVE  
JEFFERSON-IA-50129 11/14/94

IMPACT OF FLOOD AND RAIN QUESTIONNAIRE  
RCRA PROGRAM

1. Is this facility located within approximately 1/2 mile of a river, creek or stream? YES or NO? If YES, what is the name if known? \_\_\_\_\_

2. Are there any visual signs that the facility was affected by flood waters? YES or NO? If YES, describe: \_\_\_\_\_

3. Was the facility damaged by the flood water or rain? YES or NO? If YES, generally describe the damage. \_\_\_\_\_

IF THE ANSWER TO QUESTION #3 IS NO, STOP HERE.

4. Was there any damage to inventories, products or waste at the facility that would have caused the facility to generate hazardous waste? YES or NO?

5. Were there any release of hazardous material as a result of the flooding? YES or NO? If yes, describe: \_\_\_\_\_

6. If the answer to question #5 is YES, has remedial activity occurred to address the releases? YES or NO? If YES, describe: \_\_\_\_\_

7. Were there any circumstances (e.g. design criteria) or actions that the facility took that were useful in preventing potential releases or generation of hazardous materials? YES or NO? For the purpose of this question, we are looking for the "lessons learned" that may be useful in future guidance, etc. If YES, describe: \_\_\_\_\_

FACILITY NAME: \_\_\_\_\_  
LOCATION: \_\_\_\_\_  
RCRA ID #: \_\_\_\_\_

IF THE ANSWER TO QUESTION #4 IS NO, STOP HERE.

8. Is the facility currently storing hazardous waste generated as a result of the flood? YES or NO? Is the storage area located inside or outside or both? INSIDE (I), OUTSIDE (O) or BOTH (B)? Describe the type and amount of hazardous waste in storage.

TYPE	AMOUNT	I, O or B
Examples:		
Contaminated MEK	2 - 55 gal. Drums	O (Outside)
Cleaning Products	6 spray bottles	I (Inside)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Did the facility generate hazardous waste as a result of the flood that was subsequently sent off-site? YES or NO? Describe the type and amount of hazardous waste generated.

TYPE	AMOUNT
Examples:	
Contaminated MEK	2 - 55 gal. Drums
Cleaning Products	6 spray bottles

_____	_____
_____	_____
_____	_____
_____	_____

OTHER COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Last Revised: 1/25/91

Time to complete screening: 75 min

### RCRA SCREENING CHECKLIST

Inspector: S. ANAGNOSTOPOULOS

Primary Media: \_\_\_\_\_

Date: 11 / 14 / 94

IAD047055140

Facility: \_\_\_\_\_

WCI LAUNDRY DIVISION - FRIGIDAIRE CO.

Facility Address: \_\_\_\_\_

601 E CENTRAL AVE

JEFFERSON-IA-50129

Phone (515) 386-2126

Contact/Title: PAUL POPE / FACILITIES ENGINEER

SIC #: \_\_\_\_\_

Process: MANUFACTURE TRANSMISSIONS FOR WAS

#### Office Questions:-----

1) Facility description ~27 ACRES, 1 BUILDINGS

2) Does facility have an EPA ID number? Yes ☒ No ☐ # \_\_\_\_\_

3) What Chemical and/or Industrial Waste (CIW) streams are generated? (list: Name, Amount generated/month, Final disposition) \_\_\_\_\_

USED OIL, ~250 GAL/MNTH,  
WILLETS OIL OF DES MOINES; 2 PARTS WASHER (DOOI), ~300 LBS/5  
IOWA SOLVENTS OF DES MOINES, IA; WASTE TRICHLOROETHANE (FOO2)  
~4500 LBS/YEAR, BARTON SOLVENTS OF DES MOINES;

4) Does the facility classify any of their CIW's as hazardous waste (HW)? Yes ☒ (please note which ones are classified as HW) No ☐ SEE #3

5) Does the facility conduct any of the following on-site activities: Treatment/Recycling/Burning/Open Dumping /Landfills/Surface Impoundments? Describe: NO

#### Field Observations:-----

6) Are CIW/HW stored on-site? Yes ☒ No ☐

Describe (material, approximate quantity, storage method): PARTS  
WASHER (DOOI), ~20 GAL, INDOORS ON CONCRETE; SCRAP METAL  
INDOORS, ON CONCRETE, IN DUMPSTERS SEPARATED BY METAL

7) Describe condition of storage containers/tanks (open, damaged, unlabeled, leaking, etc.): PARTS WASHERS - CLOSED,  
LABELED, SOUND; SCRAP METAL - ~7 YD<sup>3</sup>, UNLABELED, SOUND,

OPEN; WASTE TRICHLOR (FOO2) - BUNGE HOLE OPEN, LABELED

8) Are incompatible wastes stored together (acids, bases, solvents, cyanides)? Yes ☐ No ☒ Describe: \_\_\_\_\_

9) Are there any signs of past spills/releases (dead or stressed vegetation, ground discoloration, stains)? Yes ☐ No ☒ Describe: \_\_\_\_\_

10) Do any of the on-site Chemical and/or CIW/HW management practices concern you? Yes ☐ No ☒ Describe: \_\_\_\_\_

11) Recommendations and/or Additional Observations: AS I TOURED  
THE FACILITY AND SPOKE TO FAC. REPS. I NOTED THE FACILITY  
WAS WELL ORGANIZED AND H.W./CIW WAS WELL MANAGED. THE  
FAC. WAS ALSO MAKING EFFORTS TO MINIMIZE WASTES BY  
USING CLOSED LOOED SYSTEMS. ~~MAN~~ MANIFESTS COLECTED.

3) (CONT.) SCRAP METAL (ALUMINUM, CAST IRON, & STEEL TURNINGS), ~ 35 YD<sup>3</sup>/YR, WEBSTER CITY IRON & METAL OF WEBSTER CITY, IA; USED HONING OIL, ~ 4500 LBS/YR, BARTON SOLVENTS; WASTE POWDER PAINT, ~ 5000 LBS/YR, BARTON SOLVENTS; OIL & COOLANT SLUDGE (W/ SOME METAL FINES) ~ 4200 LBS/YR, BARTON SOLVENTS; USED OIL FILTERS, ~ 100/YR, WILLETS OF DES MOINES

ALSO CALLED CUTTING FLUIDS

6) (CONT.) WASTE; TRICHLOR (FOO2), ~ 50 GAL, INDOORS, 55-GAL DRUM ON CONCRETE; CUTTING FLUIDS, ~ 10 GAL, 55-GAL DRUM, INDOORS ON CONCRETE: USED

ALSO A 500-GAL STEEL TANK

7) (CONT.) OIL, 55 GAL, 55-GAL DRUM INDOORS ON CONCRETE; HONING OIL, ~ 10 GAL, 55-GAL DRUM INDOORS ON CONCRETE; USED OIL FILTERS, ~ 20, INDOORS IN 55-GAL STEEL DRUM; WASTE POWDER PAINT - NONE NOT DATED CAUSE SAA, SOUND; CUTTING FLUIDS - LABELED, BUNGE HOLE OPEN, SOUND; USED OIL - LABELED BUNGE HOLE OPEN, SOUND; HONING OIL - LABELED, OPEN (USUALLY CLOSED), SOUND; USED OIL FILTERS - LABELED, OPEN SOUND;



WCA LAUNDRY DIVISION-FRIGIDAIR COMPANY  
Jefferson, Iowa

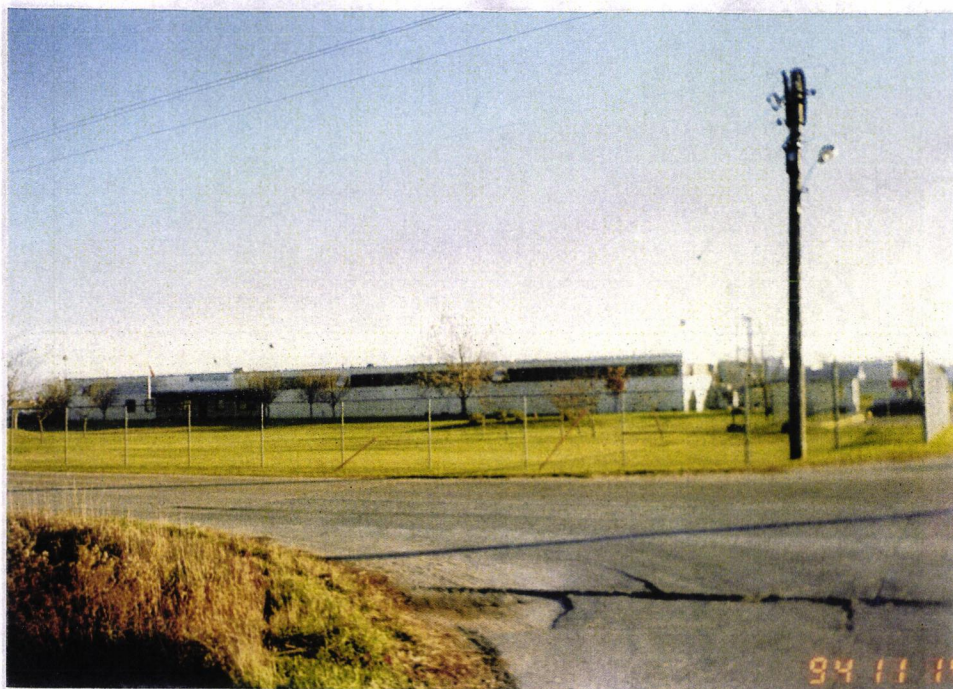


Photo No.: 1 Direction: South Photographer: Sandy Anagnostopoulos  
Date/Time: 11/14/94, 1545 Description: This photo shows the front of the facility.



Photo No.: 2 Direction: West Photographer: Sandy Anagnostopoulos  
Date/Time: 11/14/94, 1510 Description: This photo shows the facility's parts washer.



WCI LAUNDRY DIVISION-FRIGIDAIR COMPANY  
Jefferson, Iowa



Photo No.: 3 Direction: Southeast Photographer: Sandy Anagnostopoulos  
Date/Time: 11/14/94, 1515 Description: This photo shows one of the facility's scrap metal dumpsters.



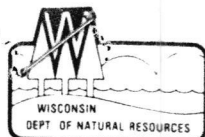
Photo No.: 4 Direction: South Photographer: Sandy Anagnostopoulos  
Date/Time: 11/14/94, 1515 Description: This photo shows the facility's satellite accumulation area that is used to accumulate, from left to right, used oil, cutting fluids, and waste trichloroethane (F002).



**WCI LAUNDRY DIVISION-FRIGIDAIR COMPANY**  
**Jefferson, Iowa**



**Photo No.:** 5 **Direction:** Southwest **Photographer:** Sandy Anagnostopoulos  
**Date/Time:** 11/14/94, 1535 **Description:** This photo shows the facility's waste storage area. From left to right are shown used oil filters, the 500-gallon used oil tank, and an empty area used to store hazardous wastes.



STATE OF WISCONSIN  
Chapter 144, Wis. Stats.  
Form 4400-66

NSIN  
Rev. 3-89

State of Wisconsin  
Department of Natural Resources  
Bureau of Solid Waste Mgt.  
Box 8094  
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 9-30-91

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>IAD047055140</b>		Manifest Document No. <b>15007</b>		2. Page 1 <b>1 of 1</b>		Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <b>Frigidaire Co 601 E Central Ave Jefferson, Iowa 50129</b>						A. State Manifest Document Number <b>WI J 64147</b>				
4. Generator's Phone ( ) <b>515-386-2126</b>						B. State Generator's ID				
5. Transporter 1 Company Name <b>Barton Solvents Inc</b>				6. US EPA ID Number <b>IAD 981719909</b>		C. State Transporter's ID <b>11113</b>				
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone <b>515 265 7900</b>				
9. Designated Facility Name and Site Address <b>Waste Research &amp; Reclamation</b>				10. US EPA ID Number <b>WID990829475</b>		E. State Transporter's ID				
						F. Transporter's Phone				
						G. State Facility's ID				
						H. Facility's Phone <b>715 834-9624</b>				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. <b>Hazardous Waste Liquid N.O.S. (111 Trichloroethylene EE ORM-E NA 9189 (F-002)</b>						<b>002</b>	<b>DM</b>	<b>00500</b>	<b>P</b>	<b>F 0 0 2</b>
b. <b>Non Hazardous, Not Regulated Waste (Honing Oil)</b>						<b>005</b>	<b>DM</b>	<b>03000</b>	<b>P</b>	
c. <b>Non Hazardous, Not Regulated Waste (Powder Paint)</b>						<b>007</b>	<b>DM</b>	<b>02000</b>	<b>P</b>	
d.										
J. Additional Descriptions for Materials Listed Above a. <b>7-10089-1RR506</b> b. <b>9209083-2WD029</b>						K. Handling Codes for Wastes Listed Above c. <b>9302133-1fd---</b>				
15. Special Handling Instructions and Additional Information <b>24 Hour Emergency Phone 515-386-2126</b>										
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										
Printed/Typed Name & Position Title						Signature		Date Month Day Year		
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials						Signature		Date Month Day Year		
Printed/Typed Name & Position Title						Signature		Date Month Day Year		
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials						Signature		Date Month Day Year		
Printed/Typed Name & Position Title						Signature		Date Month Day Year		
19. Discrepancy Indication Space <b>11a. IMPROPER SHIPPING XM DESCRIPTION</b> <b>11b. c - BOX 1 NO WASTE CODES SHOWN</b>										
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										
Printed/Typed Name & Position Title						Signature		Date Month Day Year		

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution:

- 1 - Generator send to Wis. DNR  
2 - Generator retain  
3 - Facility send to Wis. DNR

- 4 - Facility retain  
5 - Facility send to Generator  
6 - Transporter retain

Copies 1 &amp; 3 mail to Wis. DNR at above address.

Emergency 24 Hour Assistance Telephone Number  
In Wisconsin (608) 266-3232  
Outside Wisconsin (800) 424-8802

COPY 5 — FACILITY SEND TO GENERATOR



## STATE OF WISCONSIN

Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 12-91

State of Wisconsin  
Department of Natural Resources  
Bureau of Solid Waste Mgt.  
Box 8094  
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 9-30-92

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. IAD047055140		Manifest Document No. 931902		2. Page 1 of		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Frigidaire Company 601 E. Central Avenue Jefferson, Iowa 50129				4. Generator's Phone (515) 386-2126		A. State Manifest Document Number WI J381968			
5. Transporter 1 Company Name Barton Solvents, Inc.				6. US EPA ID Number IAD981719909		B. State Generator's ID			
7. Transporter 2 Company Name				8. US EPA ID Number		C. State Transporter's ID 11113			
9. Designated Facility Name and Site Address Waste Research & Reclamation Route #7 Eau Claire, WI 54701				10. US EPA ID Number WID990829475		D. Transporter's Phone 515-265-7900			
						E. State Transporter's ID			
						F. Transporter's Phone			
						G. State Facility's ID			
						H. Facility's Phone 715-834-9624			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. RQ Waste Halogenated Irritating Liquids N.O.S. (1,1,1-Trichloroethane) 6.1 UN1610 PGIII (F002)				004		01,600		F 0 0 2	
b. Non Hazardous, Non Regulated Waste (Honing Oil)				004		01,600		N R	
c. Non Hazardous, Non Regulated Waste (Powdered Paint)				003		01,200		N R	
d.									
J. Additional Descriptions for Materials Listed Above a. 7-10009-1RR506 b. 9209083-2WD029				C. 9302133-1FD126		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information 24 Hour Emergency Phone 515-386-2126									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name & Position Title X PAUL POPE FAC. ENG.				Signature R Pope				Date Month Day Year 08/17/93	
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name & Position Title Michael L. McCorkle Driver				Signature Michael L. McCorkle				Date Month Day Year 08/17/93	
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name & Position Title				Signature				Date Month Day Year	
19. Discrepancy Indication Space									
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name & Position Title				Signature				Date Month Day Year	

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

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4 - Facility retain

2 - Generator retain

5 - Facility send to Generator

3 - Facility send to Wis. DNR

6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number

In Wisconsin (608) 266-3232

Outside Wisconsin (800) 424-8802

COPY 2 -  
GENERATOR RETAIN

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## STATE OF WISCONSIN

Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 10-92

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Department of Natural Resources  
Bureau of Solid and Hazardous Waste Mgt.  
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Form Approved. OMB No. 2050-0039. Expires 9-30-94

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>IAD047055140</b>		Manifest Document No. <b>71301013</b>		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address <b>Frigidarie Company, (Jeff)</b> <b>601 E. Central</b> <b>Jefferson, IA 50129</b>						A. State Manifest Document Number <b>WI J428245</b>							
4. Generator's Phone <b>(515)-386-2126</b>						B. State Generator's ID							
5. Transporter 1 Company Name <b>Barton Solvents, Inc.</b>				6. US EPA ID Number <b>IAD981719909</b>		C. State Transporter's ID <b>11113</b>							
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone <b>515-265-7900</b>							
9. Designated Facility Name and Site Address <b>Waste Research &amp; Reclamation Co., Inc</b> <b>5200 State Rd. 93</b> <b>Eau Claire, WI 54701</b>				10. US EPA ID Number <b>WID990829475</b>		E. State Transporter's ID							
						F. Transporter's Phone							
						G. State Facility's ID							
						H. Facility's Phone <b>715-834-9624</b>							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
a. <b>RQ-Waste 1-1-1 trichloroethane</b> <b>6.1, UN2831, PGIII (FOO2)</b>						004 D M		0,24,0,0		P		F O O 2	
b. <b>Non Hazardous Special Waste</b> <b>(honing oil/filters) Non Regulated, (NR)</b>						007 D M		0,4,2,0		P		N R	
c. <b>Non Hazardous Special Waste</b> <b>(epoxy paint powder) Non Regulated, (NR)</b>						0,0,3 D M		18,0,0		P		N R	
d. <b>Non-Hazardous Special Waste</b> <b>(oil &amp; coolant sludge) Non-Regulated, (NR)</b>						0,0,7		04,20,0				N R	
J. Additional Descriptions for Materials Listed Above a. <b>7-10009-1RR506</b> b. <b>9209083-2WD029</b> c. <b>9302133-1FD</b> d. <b>9311036-2WD048</b>						K. Handling Codes for Wastes Listed Above a. <b>DO08</b>							
15. Special Handling Instructions and Additional Information  <b>24 HR EMERGENCY PHONE 515-386-2126</b>													
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Printed/Typed Name & Position Title <b>PAUL S. POPE, FAC. ENG</b>						Signature <i>Paul S. Pope</i>						Date Month Day Year <b>7 1 3 9 3</b>	
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name & Position Title <i>Michael L. McKelvie D. env</i>						Signature <i>Michael L. McKelvie</i>						Date Month Day Year <b>1 2 6 3 9 3</b>	
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name & Position Title						Signature						Date Month Day Year	
19. Discrepancy Indication Space													
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name & Position Title						Signature						Date Month Day Year	

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution:

1 - Generator send to Wis. DNR

4 - Facility retain

2 - Generator retain

5 - Facility send to Generator

3 - Facility send to Wis. DNR

6 - Transporter retain

Copies 1 &amp; 3 mail to Wis. DNR at above address.

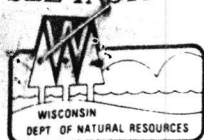
Emergency 24 Hour Assistance Telephone Number

In Wisconsin (608) 266-3232

Outside Wisconsin (800) 424-8802

COPY 2-

GENERATOR RETAIN



STATE OF WISCONSIN  
Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 12-91

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Department of Natural Resources  
Bureau of Solid Waste Mgt.  
Box 8094  
Madison, Wisconsin 53708

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Form Approved. OMB No. 2050-0039. Expires 9-30-92

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. IAD 047035140		Manifest Document No. 1 00007		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address FRIGIDAIRE COMPANY 601 E CENTRAL JEFFERSON IA 50129						A. State Manifest Document Number WI J386465							
4. Generator's Phone (515) 386-2126						B. State Generator's ID							
5. Transporter 1 Company Name IOWA SOLVENTS & CHEMICALS CORP.						6. US EPA ID Number IAD 076142330							
7. Transporter 2 Company Name <del>Dennis Lurdth Chemicals</del>						8. US EPA ID Number WID 023350192							
9. Designated Facility Name and Site Address MILWAUKEE SOLVENTS & CHEMICALS N59 W14776 BOBOLINK AVE. MENOMONEE FALLS, WI 53051						10. US EPA ID Number WID 023350192							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. RG Waste Petroleum Naphtha Combustible Liquid UN1255 (DOO1)						003DM 00300P						001 01	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information A) ERG# 27 B) ERG# 26 C) ERG# 74 D) ERG# 74 EMER RESP PH #: (515) 386-2126													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name & Position Title						Signature				Date Month Day Year 02 23 93			
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials						Signature				Date Month Day Year 02 23 93			
Printed/Typed Name & Position Title Lonnie Browne Driver						Signature				Date Month Day Year 02 23 93			
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials						Signature				Date Month Day Year 02 28 93			
Printed/Typed Name & Position Title Dennis Lurdth Driver						Signature				Date Month Day Year 02 28 93			
19. Discrepancy Indication Space													
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name & Position Title Kevin M. Bayin Mgr						Signature				Date Month Day Year 02 28 93			

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FACILITY SEND TO GENERATOR





STATE OF WISCONSIN  
Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 12-91

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Department of Natural Resources  
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Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 9-30-92

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. IAD 047055140	Manifest Document No. 00008	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address FRIGIDAIRE COMPANY 601 E. CENTRAL JEFFERSON IA 50129		4. Generator's Phone (515) 386-2125		A. State Manifest Document Number WI J386507	
5. Transporter 1 Company Name IOWA SOLVENTS & CHEMICALS CORP.		6. US EPA ID Number IAD 076142330		B. State Generator's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID	
9. Designated Facility Name and Site Address MILWAUKEE SOLVENTS & CHEMICALS N59 W14776 BOBOLINK AVE. MENOMONEE FALLS, WI 53051		10. US EPA ID Number WID 023350192		D. Transporter's Phone (414) 263-6019	
				E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID	
				H. Facility's Phone (414) 262-3550	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit We/Vol	I. Waste No.
a. RG Waste Petroleum Naphtha Combustible Liquid UN1255 (D001)		003	00300	F	D 0 0 1
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information A) ERG# 27 B) ERG# 26 C) ERG# 74 D) ERG# 74 EMER RESP PH #: (515) 386-2126					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name & Position Title WAYNE HENDERSEN		Signature		Date 04/29/93	
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title LONNIE BROWNE/DRIVER		Signature		Date 04/29/93	
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title JIMMY BAKER		Signature		Date 05/03/93	
19. Discrepancy Indication Space					
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name & Position Title LARRY DIETRICH		Signature		Date 05/03/93	

A Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution:

1 - Generator send to Wis. DNR

2 - Generator retain

3 - Facility send to Wis. DNR

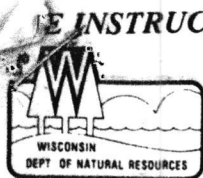
4 - Facility retain

5 - Facility send to Generator

6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number  
Wisconsin (608) 266-3232  
Outside Wisconsin (800) 424-8802

COPY 5 - Copies 1 & 3 mail to Wis. DNR at above address.  
FACILITY SEND TO GENERATOR



INSTRUCTIONS ON REVERSE SIDE OF COPY 6.

STATE OF WISCONSIN

Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 12-91

State of Wisconsin  
Department of Natural Resources  
Bureau of Solid Waste Mgt.  
Box 8094  
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 9-30-92

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. IAD 047055140	Manifest Document No. 00009	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address FRIGIDAIRE COMPANY 601 E. CENTRAL JEFFERSON IA 50129			A. State Manifest Document Number WI J386554			
4. Generator's Phone ( 515 ) 386-2126			B. State Generator's ID			
5. Transporter 1 Company Name IOWA SOLVENTS & CHEMICALS CORP.		6. US EPA ID Number IAD 076142330		C. State Transporter's ID		
7. Transporter 2 Company Name MILWAUKEE SOLVENTS		8. US EPA ID Number WID 023350192		D. Transporter's Phone		
9. Designated Facility Name and Site Address MILWAUKEE SOLVENTS & CHEMICALS N59 W14776 BOBOLINK AVE. MENOMONEE FALLS, WI 53051		10. US EPA ID Number WID 023350192		E. State Transporter's ID		
				F. Transporter's Phone 414-252-3550		
				G. State Facility's ID		
				H. Facility's Phone (414)-252-3550		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RG Waste Petroleum Naphtha Combustible Liquid UN1255 (DOO1)		003DM	00300P			D, O, O, I
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information A) ERG# 27 B) ERG# 26 C) ERG# 74 D) ERG# 74 EMER RESP PH #: (515) 386-2126						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name & Position Title PAUL S POPE		Signature [Signature]		Date Month Day Year 06/22/93		
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title Lonnie Browne/Driver		Signature [Signature]		Date Month Day Year 06/22/93		
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title Ed Sickler		Signature [Signature]		Date Month Day Year 07/1/93		
19. Discrepancy Indication Space						
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name & Position Title Judy Nunk		Signature [Signature]		Date Month Day Year 07/07/93		

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Emergency 24 Hour Assistance Telephone Number  
In Wisconsin (608) 266-3232  
Outside Wisconsin (800) 424-8802

Copy Distribution

1 - Generator send to Wis. DNR  
2 - Generator retain  
3 - Facility send to Wis. DNR

4 - Facility retain  
5 - Facility send to Generator  
6 - Transporter retain

COPY 5 - Copies 1 & 3 mail to Wis. DNR at above address.

FACILITY SEND TO GENERATOR



STATE OF WISCONSIN  
Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 10-92

State of Wisconsin  
Department of Natural Resources  
Bureau of Solid and Hazardous Waste Mgt.  
Box 8094  
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 9-30-94

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>IA 047055140</b>	Manifest Document No. <b>100010</b>	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address <b>FRIGIDAIRE COMPANY 601 E. CENTRAL JEFFERSON IA 50129</b>		6. US EPA ID Number <b>IA 076142330</b>		A. State Manifest Document Number <b>WI J430546</b>	
4. Generator's Phone ( <b>515 386-2126</b> )		7. US EPA ID Number <b>WID 023350192</b>		B. State Generator's ID	
5. Transporter 1 Company Name <b>IOWA SOLVENTS &amp; CHEMICALS CORP</b>		8. US EPA ID Number <b>WID 023350192</b>		C. State Transporter's ID	
7. Transporter 2 Company Name <b>MILWAUKEE SOLVENTS &amp; CHEMICALS</b>		9. US EPA ID Number <b>WID 023350192</b>		D. Transporter's Phone <b>(515)-265-6019</b>	
9. Designated Facility Name and Site Address <b>MILWAUKEE SOLVENTS &amp; CHEMICALS N59 W14776 BOBOLINK AVE. MENOMONEE FALLS, WI 53051</b>		10. US EPA ID Number <b>WID 023350192</b>		E. State Transporter's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. <b>RQ Waste Petroleum Naphtha Combustible Liquid UN1255 (DOO1)</b>		12. Containers No. <b>002</b> Type <b>D</b>	13. Total Quantity <b>100180 P</b>	14. Unit Wt/Vol <b>P</b>	I. Waste No. <b>010101</b>
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information <b>A) ERG# 27 B) ERG# 26 C) ERG# 27 D) ERG# 74 EMER RESP PH #: (515) 386-2126</b>					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name & Position Title		Signature		Date Month Day Year <b>07/20/93</b>	
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title <b>Lonnie Branne Driver</b>		Signature		Date Month Day Year <b>07/20/93</b>	
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title <b>Jimmy Baker</b>		Signature		Date Month Day Year <b>07/23/93</b>	
19. Discrepancy Indication Space					
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name & Position Title <b>Kevin M. Bayar</b>		Signature		Date Month Day Year <b>07/23/93</b>	

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution:

1 - Generator send to Wis. DNR

4 - Facility retain

2 - Generator retain

5 - Facility send to Generator

3 - Facility send to Wis. DNR

6 - Transporter retain

Copies 1 &amp; 3 mail to Wis. DNR at above address.

Emergency 24 Hour Assistance Telephone Number

In Wisconsin (608) 266-3232

Outside Wisconsin (800) 424-8802

COPY 5-

FACILITY SENT TO GENERATOR



STATE OF WISCONSIN

Chapter 144, Wis. Stats.  
Form 4400-66P

Rev. 10-92

State of Wisconsin  
Department of Natural Resources  
Bureau of Solid and Hazardous Waste Mgt.  
Box 8094  
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address FRIGIDAIRE COMPANY 601 E. CENTRAL JEFFERSON IA 50129		1AD 047055140		A. State Manifest Document Number WI J430599	
4. Generator's Phone ( ) 515 386-2126		5. Transporter 1 Company Name IOWA SOLVENTS & CHEMICALS CORP		B. State Generator's ID	
6. US EPA ID Number 1AD 076142330		7. Transporter 2 Company Name MILSOFT SERVICE CORP		C. State Transporter's ID	
8. US EPA ID Number WID 023350192		9. Designated Facility Name and Site Address MILWAUKEE SOLVENTS & CHEMICALS N59 W14776 BOBOLINK AVE. MENOMONEE FALLS, WI 53051		D. Transporter's Phone ( ) 263-4019	
10. US EPA ID Number WID 023350192		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		E. State Transporter's ID	
12. Containers No. Type		13. Total Quantity		F. Transporter's Phone	
14. Unit wt/vol		15. I. Waste No.		G. State Facility's ID	
a. RG Waste Naphtha Solvent (Combustible Liquid) UN1256 PG III		003 DM 00300 P		H. Facility's Phone (414) 252-3350	
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information A) ERG# 27 B) ERG# 26 C) ERG# 27 D) ERG# 74 EMER RESP PH #: (515) 386-2126					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. If I am a large quantity generator, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment;  OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name & Position Title		Signature		Date Month Day Year 11/30/93	
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title Lonnie Browne/Driver		Signature		Date Month Day Year 11/30/93	
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials Printed/Typed Name & Position Title Jimmy Baker		Signature		Date Month Day Year 12/02/93	
19. Discrepancy Indication Space					
20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name & Position Title		Signature		Date Month Day Year 12/06/93	

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

Copy Distribution:

1 - Generator send to Wis. DNR

4 - Facility retain

2 - Generator retain

5 - Facility send to Generator

3 - Facility send to Wis. DNR

6 - Transporter retain

Emergency 24 Hour Assistance Telephone Number

(608) 266-3232

COPY 5-

Copies 1 &amp; 3 mail to Wis. DNR at above address.

Outside Wisconsin (800) 424-8802

FACILITY SENT TO GENERATOR



**RCRIS HANDLER INFORMATION**

This form completed on 11/14/94 (date) by  
S. ANAGNOSTOPOULOS (name of person completing form)  
PRC-EMI (name of person's  
employer), ~~TES~~ REPA Contractor.

Instructions for completing form: Completion of all items in BOLDFACE is REQUIRED; completion of other items is optional, subject to the availability of the information.

EPA RCRA ID NUMBER: **IA** IAD047055140  
WCI LAUNDRY DIVISION - FRIGIDAIRE CO.

**1. NAME OF INSTALLATION** 601 E CENTRAL AVE  
JEFFERSON-IA-50129

**2. LOCATION OF INSTALLATION** (PHYSICAL ADDRESS, NOT PO BOX OR RURAL ROUTE NUMBER; ADDRESS MUST BE SPECIFIC; IF NECESSARY, INCLUDE DIRECTIONS ON HOW TO FIND THE INSTALLATION)

- EXAMPLES OF UNACCEPTABLE INSTALLATION ADDRESSES ARE: "Box 47," "RR #3," "Curtis Ave," "Hwy 49 West"

- EXAMPLES OF ACCEPTABLE ADDRESSES ARE: "123 Main St," "1 mile west of Hwy 6 on County Road EE," "J 12," "NW corner of Jackson and Jefferson Streets"

**STREET ADDRESS:** SEE #1

**CITY/ZIP CODE:** \_\_\_\_\_, **IA** \_\_\_\_\_

**3. INSTALLATION MAILING ADDRESS** (IF SAME AS LOCATION ADDRESS, WRITE "SAME"):

**STREET ADDRESS:** SEE #1 SAME

**CITY/ZIP CODE:** \_\_\_\_\_, **IA** \_\_\_\_\_

**4. INSTALLATION CONTACT PERSON:**

Name: PAUL POPE

Title: FACILITIES ENGINEER

Telephone Number: Area Code (515) 386-2126

Street Address: SEE #1

City/Zip Code: \_\_\_\_\_, **IA** \_\_\_\_\_

**5. OWNERSHIP INFORMATION:**

Name of Installation's Legal Owner: WHITE CONSOLIDATED INDUSTRIES

Street Address: 300 PHILLIPS ROAD

City/Zip Code: COLUMBUS, OH, IA 43228

Telephone Number: Area Code (614) 792-4100

**6. RCRA REGULATED ACTIVITY APPARENTLY BEING CONDUCTED AT SITE**  
(CHECK ALL THAT APPLY)

☒ Hazardous waste generation ☐ Hazardous waste transportation  
☐ Conditionally exempt small quantity generator

☐ Transports waste for self only

☒ Small quantity generator

☐ Transports waste for hire

☐ Large quantity generator

☐ Other: (specify) \_\_\_\_\_

RCRIS data entered  
BY RCRIS/NARP/SEE  
ON 4/29/97

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
CONFIDENTIALITY NOTICE

Facility Name WCI LAUNDRY DIVISION	
Facility Address 601 E. CENTRAL AVE. JEFFERSON, IA 50129	
Inspector (print) S. ANAGNOSTOPOULOS	Title PRC-EMI
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	
Date 11/14/94	

It is possible that the United States Environmental Protection Agency (EPA) will receive public requests for release of the information obtained during inspection of the facility above. Such requests will be handled by EPA in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. EPA is required to make inspection data available in response to FOIA requests, unless the Agency determines that the data contains information entitled to confidential treatment.

Any or all of the information collected by EPA during the inspection may be claimed confidential, if it relates to trade secrets or commercial or financial matters that you consider to be confidential. If you make claims of confidentiality, EPA will disclose the information only to the extent, and by the means of the procedures set forth in the regulations (cited above) governing EPA's treatment of confidential information.

To claim information confidential, you must certify that each claimed item meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within fifteen (15) calendar days of the claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). This statement should be mailed by registered, return-receipt requested mail to the Inspector at the address listed above. Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

At the completion of the inspection, you will be given a receipt for all materials collected. At that time you may make claims that some or all of the information is confidential and meets the criteria listed above.



U.S.EPA INSPECTION CONFIDENTIALITY NOTICE (cont.)

Facility Name WCI LAUNDRY DIVISION
Facility Address 601 E. CENTRAL AVE. JEFFERSON, IA 50129

If you are not authorized by your company and there is no one on the premises of the facility who is authorized to make confidentiality claims, this notice will be sent by certified mail, along with the receipt for documents, samples, and other materials, to the authorized representative designated below.

Authorized Representative \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

If the authorized representative listed above requests confidential treatment, they must return a statement specifying any information which should receive confidential treatment and written comments in support of the claim based on factors listed in 40 CFR 2.204(e)(4).


This statement from the authorized representative should be mailed by registered, return-receipt requested mail within fifteen (15) calendar days of receipt of the Confidentiality Notice to the Inspector at the address listed on page 1.

Failure to submit confidentiality claims and comments within the fifteen (15) day period will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

=====

To be completed by the facility official receiving this Notice:

I have received and read this Notice.

Facility Representative Provided Notice (print) PAUL POPE	Title FACILITIES ENG
Signature/Date 	11-14-94

(rev:1/20/93)



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REQUEST FOR CONFIDENTIAL TREATMENT

Facility Name WCI LAUNDRY DIVISION
Facility Address 601 E. CENTRAL AVE. JEFFERSON, IA 50129

Information for which confidential treatment is requested:

NONE

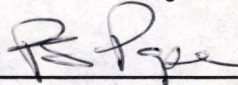

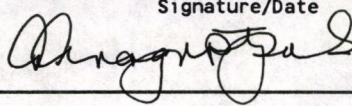
Acknowledgement of Claimant

The undersigned requests that confidential treatment of the information described be provided in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. The undersigned further acknowledges that they are authorized to make such claims for their firm.

The undersigned also certifies that each claimed item described above meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within 15 days of your claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

Authorized Representative (print) PAUL POPE	Signature/Date  11-14-94
No confidential treatment claimed during the inspection:  (Facility Representative's initials)	
Inspector (print) S. ANAGNOSTOPOULOS	Signature/Date  11/14/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name WCI LAUNDRY DIVISION
Facility Address 601 E. CENTRAL AVE. JEFFERSON, IA 50129

Documents Collected? YES X (list below) NO     

Samples Collected? YES      (list below) NO X Split Samples: YES      NO     

Documents/Samples were: 1) Received no charge X 2) Borrowed      3) Purchased     

Amount Paid: \$                      Method: Cash      Voucher      To Be Billed     

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

=====

Receipt for the document(s) and/or sample(s) described below is hereby acknowledged:

WASTE TRICHLOR MANIFESTS


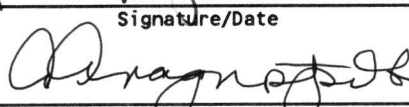
DATED 3/10/93, 8/17/93, 12/13/93

IOWA SOLVENT MANIFESTS

DATED ~~7/10/93~~ 2/22

2/23/93, 4/26/93, 6/22/93

9/20/93, 11/30/93

Facility Representative (print) PAUL POPE	Signature/Date  11-14-94
Inspector (print) S. ANAGNOSTOPOULOS	Signature/Date  11/14/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	

## RCRIS HANDLER INFORMATION REPORT

May 16, 1994

The information summarized below has been entered into EPA's RCRA Computer Data Base for the INSTALLATION LOCATION AND EPA RCRA Identification Number listed. If any of this information is inaccurate, you may notify us of the change(s) by writing to us, telephoning us, or by completing a Notification of Regulated Waste Activity Form (EPA Form 8700-12), a copy of which is attached, or simply marking any changes on this report and sending it to EPA at:

EPA REGION 7 - RCRA/IOWA  
726 MINNESOTA AVENUE  
KANSAS CITY, KANSAS 66101

Your cooperation in helping us to maintain accurate records is appreciated. If you have any questions, please call our Iowa RCRA Hazardous Waste Inquiry Helpline number (913) 551-7861, and leave a message. Someone will get back to you as soon as possible.

EPA RCRA ID Number: IAD047055140

Name of Company/Installation: WCI LAUNDRY DIVISION - FRIGIDAIRE CO.  
Location of Installation: 601 E CENTRAL AVE  
City/State/Zip: JEFFERSON, IA 50129  
County: GREENE

Mailing Address: 601 E CENTRAL AVE  
City/State/Zip: JEFFERSON, IA 50129

Installation Contact: PAUL POPE  
Job Title: FACILITIES MFG ENGINEER  
Phone Number: (515) 386-2126  
Contact's Address: 601 E CENTRAL AVE  
City/State/Zip: JEFFERSON, IA 50129

Current Owner of Installation: WHITE CONSOLIDATED INDUSTRIES  
Owner's Address: 300 PHILLIPI RD  
COLUMBUS, OH 43228  
Phone Number: (614) 792-4100

Land Type:  
Owner Type: Private

Type(s) of Regulated Activity: SMALL QUANTITY GENERATOR

Hazardous Wastes Handled: D001, F002

Signature

PAUL POPE FACILITIES 11-14-94  
Name and Official Title ENG. Date Signed

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RCRIS data entered/

BY

JCSO AARP/SEE

ON

4/29/97